CERTIFICATE OF TRANSMISSION VIA FACSIMILE PURSUANT TO 37 C.F.R. 1.6(d)

I certify that this document is being sent via facsimile to the United States Patent And Trademark Office, at facsimile no. 703/872-9306, on:

Date: ___2 - 7 - 05___   By: ___Sri Nieto___

Signature of Person Depositing Facsimile

PATENT

IN THE UNITED STATES PATENT
AND TRADEMARK OFFICE

Applicant(s):	Brooks	Atty. Docket No.:	37829.0300
Serial No.:	10/075,422	Client Ref. No.:	01-0609
Filed:	February 13, 2002	Examiner:	Roman, Angel
Group Art Unit:	2812	Confirmation No.:	7559
Title:	METHODS AND APPARATUS FOR STACKED-DIE INTERPOSER		

PETITION FOR REVIVAL OF AN UNINTENTIONALLY ABANDONED
APPLICATION PURSUANT TO 37 C.F.R. §1.137(b)

Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Honorable Commissioner:

Applicants, by and through their undersigned counsel, hereby petition the Commissioner for revival of the above captioned patent application, pursuant to 37 C.F.R. §1.137(b). The above-identified application became deemed abandoned because no appeal brief was timely-filed subsequent to filing of the notice of appeal on April 5, 2004. It is respectfully submitted that the delay in filing a RCE or appeal brief was wholly unintentional.

1628509

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number: 10/075422

CLAIMS AS FILED – PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		☐

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	19	Minus	20	=
Independent	2	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

2/7/03

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	5	Minus	20	=
Independent	1	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total		Minus	••	=
Independent		Minus	•••	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.